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ABSTRACT

Migrant students--especially those requiring special education--are at a disadvantage in our nation's tradition-based schools. Highly mobile migrant students change schools frequently enough to be out of step with normal school calendars, causing both handicapped and gifted students to be underidentified as candidates for special programs. Migrant students who are more "settled out" and remain for some time in the same school carry with them academic losses sustained during times of high mobility. These students find themselves being overrepresented in some categories of special education. Even when migrant students are placed properly, the time-consuming task of developing an individualized education plan often is interrupted by a move to a new school. Information exchange and mechanisms for ensuring academic continuity for the special education student are just now beginning to emerge. More interstate and intrastate coordination is prerequisite to equitable educational treatment of migrant students. Additional efforts to recruit eligible students are called for, along with improved involvement of the parents of migrant students. If the parents of migrant children are ill-equipped to influence the educational process, and that is often the case, others must act upon the mandate to build an educational system that enfranchises all out citizenry. (JHZ)

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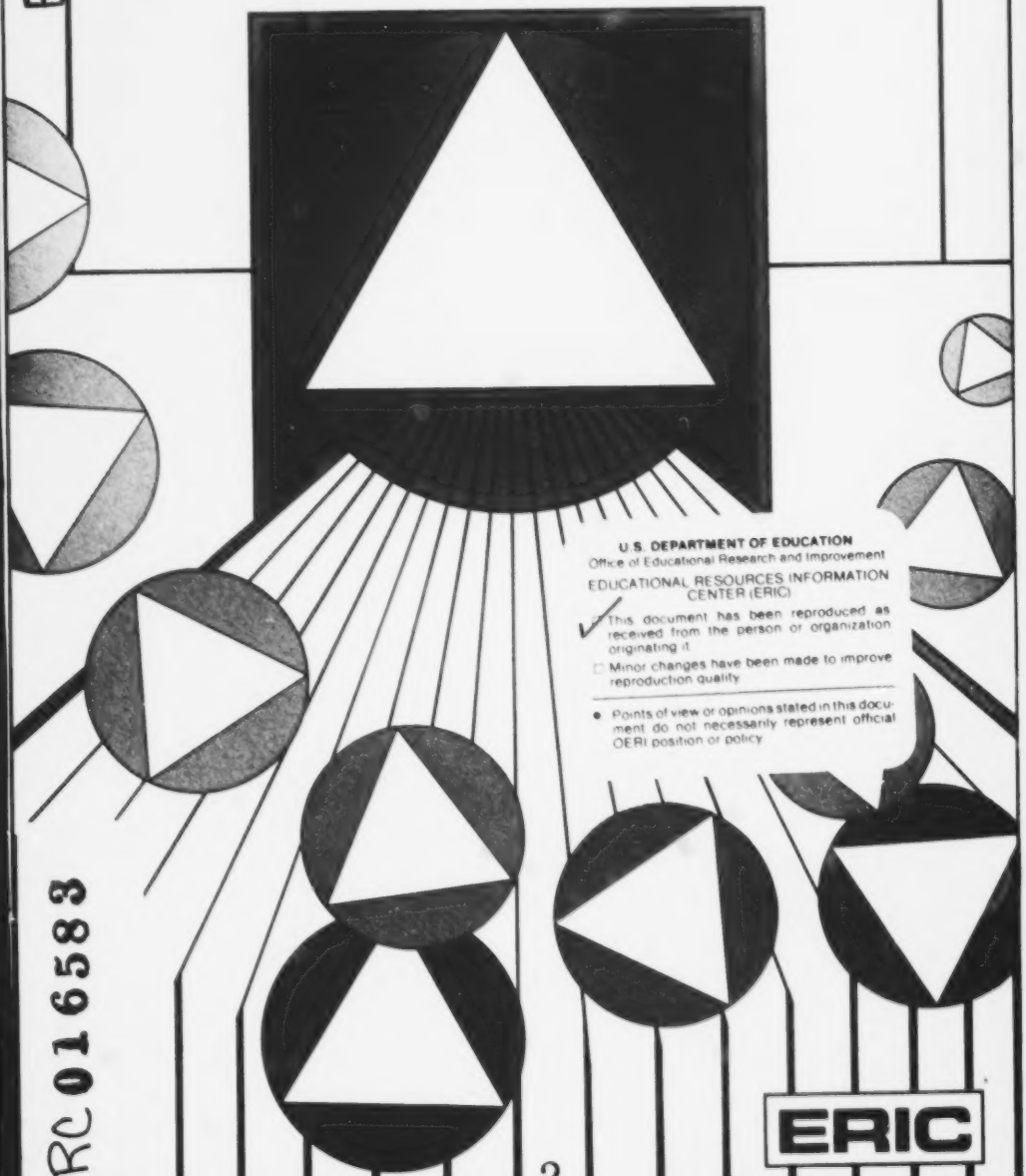

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SPECIAL EDUCATION FOR MIGRANT STUDENTS

by

The Interstate Migrant Education Council
A Special Project of the
Education Commission of the States

Congressman William D. Ford, Chairman

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INTRODUCTION

The focus of this paper is upon the special education needs of migrant students. Who are they? Why are they particularly at risk? What does the law require for children eligible for special education? What conditions suggest a need for special education? What are the special education needs of migrant students and what should be done in the future for these students? These issues are examined against a backdrop of current information to produce a rounded view of special education and the migrant student. The paper is structured to identify major service needs, legislative mandates, and issues requiring further action by host school systems.

WHO ARE MIGRANT STUDENTS?

School-age children of migrant farmworkers in the United States are heirs to an uncertain academic future, one filled with problems. Schools that have been designed mainly for geographically stable students present difficulties for migrant students. The Interstate Migrant Education Council ([IMEC,] 1987, pp. 9-10) has explained how, for migrant students, educational continuity is fragmented into episodes of loosely related educational experiences:

> ...the unique problems that migrant students have in public schools are clear. Many are

> non-native English speaking. As a result, migrant students have a generally lowered success rate in schools where English fluency tends to be taken for granted. The mobility of migrant students surely retards educational progress. It takes time to adjust to a new educational environment and even more time to learn to be successful within it. This is time that migrant students do not have. Migrant students are typically older than their classmates--another circumstance that takes its toll. Their parents have less education than other parents. Migrant students have ready access to work opportunities, which, combined with a need to work, can interfere with school. They are outsiders in the community and often are excluded from school activities. And the list goes on.

Migrant students often accumulate a patchwork collection of academic credits that, when summed at high school graduation time, do not meet the requirements for a diploma. Prerequisites that change from district to district and from state to state make graduation an elusive goal. Realizing the remoteness of graduation tempts many migrant students to drop out of school, especially when they fall one or more grades below the level common to their own age group. The U.S. General Accounting Office ([GAO,] 1986, p. 11) reported this lagging behind to be "among the most powerful predictors for dropping out."

The pressing economic needs of the migrant family commonly lead students to work in the fields rather than

spend time in school. Long-term futures become subordinate to current financial needs that must be met for the sake of survival.

Should an individual student have difficulty in learning due to problems other than mobility, English language deficiency, or lack of support systems in the home and community, the chance of academic success is even more remote. Health problems, learning disabilities, or other handicapping factors intensify an already difficult situation.

LIFESTYLE AND ENVIRONMENTAL HAZARDS

Work in the fields is arduous. Living conditions are commonly substandard. Health problems among members of the migrant work force are common. The hazards associated with the work itself multiply the chances of short and long-term illnesses.

A summary of a study conducted in 1984, The Occupational Health of Migrant and Seasonal Farmworkers in the United States, offers a revealing look at the nature of these special hazards and their debilitating results:

> Occupational health hazards threaten not only the adult farmworker wage earners, but their entire families. Because of meager wages, even pregnant women, nursing mothers, and small children often are forced to work in the fields to help support the family. (Children perform 25% of all farm labor.)

> Even those children not actually at work in the fields are exposed to dangers such as their parents' infectious diseases contracted at the workplace or pesticide poisoning from residues on parents' work clothes.
>
> Substandard housing increases the risk of accidents and sanitation-related diseases. Many farmworker labor camps and housing units are located next to fields that regularly are treated with pesticides, subjecting them to pesticide drift or even direct spray. The housing is rarely equipped with laundry facilities, and pesticide-contaminated clothing often must be washed in sink or bathtub, which exposes all the occupants to the pesticides.
>
> Overcrowded housing units, poor ventilation, and inadequate, faulty, or non-existent plumbing systems further spread disease. Garbage heaps and stagnant water outside housing units breed rats and insects, which harbor and transmit communicable diseases.
>
> Some migrants do not have any housing, and are forced to live in the fields where they work, often using contaminated water from irrigation ditches for drinking, cooking, and bathing. (National Rural Health Care Association [NRHCA], 1985, pp.3,5.)

It is small wonder health problems spawn quickly under such living conditions. Poor field sanitation (lack of toilets, handwashing facilities and acceptable drinking water) is cited as a violation of a basic principle of public health--"...poor hygiene causes illness" (NRHCA, 1985, p.5). Also noteworthy is the fact that "migrant and seasonal farmworkers are the only workers in the United States not protected against

toxic substances by the Department of Labor's Occupational Safety and Health Administration (OSHA)" (NRHCA, 1985, p.5).

Chronic exposure to pesticides produces effects that are not clearly understood, but among the suspected results are behavioral and psychological abnormalities. Contact with pesticides can be devastating during pregnancy and child care periods, as the National Rural Health Care Association has specified (1985, p. 8):

> Because of changes in a pregnant woman's lung function, she is more susceptible to pesticide poisoning. Exposure to pesticides during pregnancy has been linked both to higher than normal rates of fetal limb defects and Down's Syndrome. Since some chemicals are secreted in human milk, the infant continues to be affected when the mother nurses her baby. Pesticides also may decrease the amount of milk a woman can produce.

Environmental, social, and economic hazards faced by migrant children are clearly greater than those encountered by the majority of the population. The stage is set for heightened vulnerability to handicaps leading to learning difficulties.

SPECIAL EDUCATION AND THE LAW

The Education for All Handicapped Act of 1975 (P.L. 94-42, Codified as 20 USC 1400) provides for all handicapped children aged 3-21 as follows:

> It is the purpose of this act to assure that all handicapped children have available to them a free appropriate public education and related services designed to meet their unique needs; to assure that the rights of handicapped children and their parents or guardians are protected; to assist states and localities to provide for the education of all handicapped children; and to assist and assure the effectiveness of efforts to educate handicapped children. (National Clearinghouse for Bilingual Education [NCBE], 1984, p.3.)

The Act calls for special education that meets the handicapped child's unique needs. This instruction may be given in the classroom, at home, or in hospitals and institutions, at no cost to parents or guardians. Related services such as transportation and other developmental services, including speech pathology, audiology, psychological services, physical and occupational therapy, and recreation, are specified by the Act.

The Act offers other definitions that provide useful background. An Individualized Education Plan (IEP), prepared for each handicapped child, is to contain a written statement of current levels of educational performance, annual goals and short-term objectives, and a listing of specific educational services to be delivered. An assessment of whether or not the established objectives are being attained is to be made on at least an annual basis.

Children may be considered handicapped if they are mentally retarded, are hearing impaired or deaf, have orthopedic impairments or vision handicaps, suffer from specific learning disabilities, or are seriously emotionally disturbed (NCBE, 1984).

CONDITIONS SUGGESTING A NEED FOR SPECIAL EDUCATION

The presence of certain types of handicaps may suggest a need for special education for the individual child. Gifted children are included among those with special needs. The array of physical, behavioral, and emotional criteria set forth as the means for determining whether or not a child is handicapped is often lengthy and detailed. NCBE's Information Packet on Bilingual Special Education contains much detail and precision in definition beyond the scope of this publication. Summaries of handicapping conditions follow.

Visual impairments may stem from a variety of conditions including partial sight, low vision, or blindness. The general population, under 45 years of age, suffers from visual impairments at a rate of 7 per 1000.

Speech and language impairments may derive from delayed communication, stuttering, or problems deriving from retardation, learning disabilities, and cerebral palsy. Facility with language is key to the acquisition

of new skills and concepts. Migrant students often suffer from a language disability of a different sort--their native language often is not English. Migrant Student Record Transfer System (MSRTS) data identify 68.6% of migrant students as Hispanic (IMEC, 1987).

A partial or complete inability to hear shuts the child off from the flow of audible communication. This deprivation slows the development of a hearing impaired child when compared to a hearing peer.

Individuals are commonly considered mentally retarded if their score on an individual intelligence test is two or more standard deviations below the mean. There is generally an accompanying inability to adapt to everyday life.

Orthopedic and physical problems may be present at birth, may result from other physical causes, or may be neurological in origin, such as cerebral palsy. These disabilities and other special health problems may produce virtually no effect upon the child or the effect may be profound.

Learning disabilities are disorders in one or more of the basic psychological processes involved in understanding or in using language. These problems result in difficulty with language and/or mathematical skill acquisition. The definition of learning disabilities may vary from state to state. A precise definition is elusive, as is the estimate of the number

of children who have a learning disability. Estimates range from 1% to 30% of the total school population.

Social and emotional disturbances are characterized by symptoms that include an inability to relate acceptably to others, the display of inappropriate behaviors or feelings under normal circumstances, or chronic depression. Hyperactivity, delinquency, and withdrawal are examples of such inappropriate behaviors.

Gifted students represent a portion of the population with different needs. Criteria for classifying students as gifted vary from state to state, but generally consist of some measures such as intelligence quotient, achievement, critical thinking abilities, creativity, or some combination of these measurable factors. Gifted students represent a special challenge to the educational system to create programs allowing their potential to be realized.

Rodriguez (1982, pp. 27-28) comments on the gifted Mexican American child, concluding as follows:

> ...educators have completely neglected the gifted child within this population. Much of the blame for the under-representation of culturally and linguistically different minority group gifted children is directed to the procedures used in identification.
>
> It has been hypothesized that present I.Q. assessment procedures identify only one gifted minority child in every three, and much of this is due to the lack of proper identification procedures. Studies by Meeker and Bruch suggest that early identification and

> intervention is of crucial importance in any program for gifted children. ...it is inadvisable to attempt early identification using culturally biased instruments, since traditional assessment measures identify only the most acculturated minority child.

Rodriguez (p. 29) suggests that underrepresentation of minority students in gifted programs will continue until some conditions are met, notably:

> ...more efficient identification procedures must be implemented if educational systems are to meet the educational needs of culturally and linguistically different gifted children. One possible alternative is multi-assessment strategies that will qualify the child under any one of a variety of identification methods. This approach appears to be a step in the right direction, since such assessment would hopefully stop penalizing culturally and linguistically minority group children for their cultural heritage.

Even with proper identification, barriers may still be encountered by the gifted migrant child in the form of "non-reciprocity" among various states. Criteria for classifying a child as gifted vary from state to state with the result being reassessment required for entry into a gifted program. New Mexico, for example, requires retesting by a New Mexico certified professional before a child may become a participant in programs for the gifted (D. Johnson, personal communication, November 17, 1987). Further, it should be possible to identify monolingual, Spanish-speaking

children as gifted without reliance upon their being fluent in English.

Accurate identification of the conditions discussed above requires competent action in a number of areas. Assessment is a key process in educational decision-making and, with regard to special education, takes on a special nature. "It involves looking at the child as well as the child's environment in ways other than just testing. It is a process that draws on a variety of information to develop a plan of action" (NCBE, 1984, p.35).

Typically, a "screening process" is employed as the first step in identifying students who have needs that may call for special education. Either formally or informally, this process is applied to all children in the system.

A section from a National Information Center for Handicapped Children and Youth document (NCBE, 1984, p. 35) follows:

> If your child "fails" a screen the school system must inform you of their proposal for further evaluation. Before they proceed with the evaluation, you [the parent] must agree in writing. You will be told about your rights in this process, including the right to see all the records and to get a report of the result the school will use for decisions.
>
> A complete assessment may involve a number of specialists in addition to the classroom teacher. These specialists may include school psychologists, speech and language therapists,

occupational therapists, physical education specialists, physical therapists, and other specialists depending on the suspected nature of the child's handicap. These specialists form the multidisciplinary team. The child is assessed in all areas related to the suspected handicap.

Specialized testing is a common part of the assessment process and may include examination of such areas as speech and language, achievement, perception, intelligence, personality, and adaptive behavior. A thorough testing process requires time and the expenditure of considerable energy on the part of school personnel.

Assessment may be difficult if a minority student is involved--especially if the child's primary communication is in a language other than English or if the child has limited English proficiency. These conditions can lead to the erroneous conclusion that such students have problems hearing or are slow learners. They may not understand directions or words on tests, or may be unable to respond correctly (NCBE, 1984, p. 37). Cultural bias may be present on the part of evaluators or inherent in the assessment instruments themselves. The NCBE (1984, p. 37) has commented, "[T]eachers or school psychologists don't understand [the way culture affects the child's behavior], even though the behavior is perfectly acceptable in...[the student's] own culture."

The lengthy nature of the assessment process may lead school officials away from its application to migrant students simply because their residence in the system is expected to be brief. Even when a complete assessment is made, the development of an individualized education plan (IEP) may become an even more remote possibility. A more careful examination of the particular problems faced by migrant students follows.

SPECIAL EDUCATION NEEDS OF MIGRANT STUDENTS

The special education needs of migrant students are not easy to pinpoint. As Barresi (1982) points out, "Child find, identification, assessment, and placement policies and procedures are frequently inadequate for children who move often." Because of the migrant child's mobile lifestyle and living conditions, poor health and inadequate nutrition are common traveling companions. The lifestyle sets the stage for difficult emotional and social times that can manifest themselves in both physical and emotional forms. A student who is enrolled in a school for only a short period of time is far less likely to receive an extensive and intensive diagnostic exploration of his or her problems. Barresi (1982) poses several reasons for the failure to identify adequately those migrant students requiring special education:

- Many migrant handicapped children are never enrolled in school or are allowed to drop out early by their parents.
- Teachers do not become familiar with the migrant child's needs. Migrant children often are not in one school long enough for teachers to observe performance and decide whether educational problems require a referral for special education assessment or are merely the result of sporadic attendance and frequent changes in enrollment.
- Once mobile handicapped children are referred for assessment, they may move on before the process is begun or completed. Usually, the next school in which the student enrolls is unaware that such assessments have been carried out.
- The culture and language of some migrant students may cause difficulties in accurate diagnosis.

Barresi (1982) signals still other reasons why special education needs of migrant students go unmet. These include variations in eligibility standards from state to state, requirements for residency, waiting periods combined with limited program availability, lack of programs consistent with the migrant student's available time (i.e., summer school), and a shortfall in communications and cooperation among service programs and agencies.

Hunter (1982, p. 471) reviewed the special education

statutes of six states representing "a cross-section of states serving migrants" and found that while there was variation among age eligibility and categories of handicapping conditions, there were insufficient differences to "bar significant numbers of students from special education services." Hunter went on to conclude that "in general, however, the laws are open enough to allow interstate cooperation in serving handicapped migrant students." Yet he found that "none of the state statutes examined contained any provisions that anticipated either sending or receiving placement or treatment information across state lines. Thus, the concept of continuity of services for mobile students has been overlooked in at least six states."

Pyecha and Ward (1982, p. 490) reported on a survey conducted to "determine the extent to which IEPs (Individualized Education Programs) and IEP-related information were transmitted between, and utilized by, staff of the various schools in which the students were enrolled." The authors (p.494) indicated survey results for the sample suggested the following:

1. Different schools in which a handicapped migrant student enrolls are not consistent in identifying and preparing IEP's for the student.
2. IEP's are developed less frequently for the more mobile handicapped migrants (enrolled in more than one school district) than for the less

mobile migrant students (enrolled in a single school district).

3. Although IEP's and/or IEP-related information are rarely transmitted between the schools in which handicapped migrant students enroll, such information is useful to staff in the receiving schools for identification of students and preparation of IEP's.

One step has been taken to ameliorate the problem in transferring records (J. Gonzales, personal communication, November 19, 1987). The Migrant Student Record Transfer System (MSRTS) coding system has been expanded to include special education information. This accomplishment resulted from the cooperative efforts of the Interstate Migrant Education Council, the National Association of State Directors of Migrant Education, the National Association of State Directors of Special Education, and MSRTS itself. The change was implemented in the fall of 1986, by inclusion in the MSRTS Training Manual.

A new coding section titled "Special Education Contact Data" contains several new data items:

- Name of a contact person, as appropriate, in the sending district who is knowledgeable about the child's special education needs.
- Identification of either an identified or suspected handicapping condition.

- o Information concerning whether or not an IEP is available.
- o Enumeration of any special education services that have been provided for the child.
- o Identification of related services that have been provided, i.e., speech pathology, counseling, audiology, etc.

Though lack of continuity from state to state may still impair successful provision of services to migrant students, there have been efforts to assemble information on the degree to which services are provided within single states. Data regarding the extent of special education services provided to migrant students were reported in the California Policy Workshop on Special Education Needs of Migrant Handicapped Students - Proceedings Report (California State Department of Education [CSDE], 1986). This report "...suggests that migrant students are underidentified and underserved" (p.2). Findings noted a 1.37% rate of special education needs being identified for migrant students as compared to an 8.33% identification rate for the total school enrollment. This combines with the fact that migrant educators are not always aware of which students have been identified as handicapped so the students are not coded as such in the MSRTS. There is a resulting need for improved coordination among special programs. As with many other sources, the California report suggests

an inadequate standardization of reporting methods that, in turn, yields imprecise counts of migrant special education needs. Nonetheless, the authoring task force identified problems awaiting resolution (CSDE, 1986, pp. 3-4):

- The mildly handicapped migrant student (one who has some learning disabilities, mild retardation, or emotional disorders) appears not to be identified to the extent that exists in the larger school population.
- Identification occurs later in the student's school career because of frequent moving or because migrants are a low priority for diagnostic resources.
- Special education records are requested and received after transfers of migrant records, and they are forwarded incompletely; delays occur because of incomplete requests or records having been forwarded to a different location.
- Duplication of assessments occurs as a result of interstate differences in admission criteria or because tests are unavailable.
- Gaps in services occur because of differences in special education programs, materials, or methods, because no program is available when the migrant arrives, or because the child is not eligible for special education in all states.

- o In some areas migrants may be inappropriately placed in special education because of language barriers.
- o Mildly handicapped migrants may be served in remedial classes because of the time involved in processing special education referrals.
- o Lack of awareness and consistent, purposeful coordination between migrant education and special education impede the efficient identification and delivery of services to handicapped migrant students.

While there is evidence suggesting that the special education needs of migrant students are not always met, there may also be reason to suspect that some students who are identified as candidates for special education are misidentified. Ysseldyke, Algozzine, and Richey (1982) asked more than 200 public and private school professionals for estimates of the incidence of several classes of handicapping conditions within various groups of students. The authors reported that "highest estimates were for children of minorities and low socioeconomic status, while children of high socioeconomic status and girls received the lowest estimates." The authors go on to say, "In making decisions about the extent to which individual students exhibit specific handicaps, decision makers may be influenced by their expectations or preconceived

notions." An implication of this finding is that placement decisions may be biased against migrant students (who, in addition to being migrants, are also minority students and members of a lower socioeconomic group). This leads to inappropriate educational services being made available to them.

There is indeed a scarcity of specific data regarding the occurrence of handicapping conditions for migrant students. Duran (1983) has, however, summarized findings of a study aimed at counting handicapped migrant students in the State of Washington. Although migrant students were found to be slightly underrepresented in the state's handicapped student population, there was no support for concluding that migrant students were denied access to special education. The findings did, however, reveal anomalies in distribution by specific categories of handicap. Behavioral disabilities represented a state average of 7.20%, whereas migrant students comprised a 1.56-3.73% average. Communication disordered students represented a state average of 19.36% with the migrant student average being 10.00-13.02%. Migrant students were found to be overrepresented in the category of mild mental retardation (13.56% for the overall state population; 26.85% for migrants).

Current data collection and reporting procedures are generally thought inadequate to provide clear information on whether or not migrant student special

education needs are being adequately met. One set of recommendations has come forth. The Washington State report concludes with a series of recommendations regarding future data collection as well as the identification and programming of migrant handicapped children. These are as follows (IMEC, 1984, pp. 3-4):

1. A count of migrant students who are identified as handicapped and receiving special education should be conducted on an annual basis.
2. The migrant handicapped student count should include age, grade level and sex data.
3. An annual child count should also include preschool migrant children who are served by migrant funded non-public agencies.
4. The representation of migrant students within specific handicap categories needs to be further investigated.
5. A case study analysis of 1981-82 Status I migrant students referred for possible special education placement should be conducted to determine the referral-placement ratio of these highly mobile students.
6. A further data collection and analysis study might identify the instructural programs and regulated services received by migrant handicapped students to determine whether they are receiving appropriate services.

The extent to which the special education needs of migrant students are met remains clouded. More adequate data collection mechanisms are needed. A task force chartered by the Interstate Migrant Education Council concluded (IMEC, 1984, p. 11):

- The mildly handicapped migrant student (those with some learning disabilities, mild retardation or emotional disorders) appears not to be identified to the extent that exists in the larger school population. Although no accurate figures exist, only one interviewee felt that as many as 10.7 percent of this migrant population had been identified.
- Identification occurs later in the student's school career due to frequent moving or because migrants are a low priority for diagnostic resources.
- Special education records are requested and received after migrant record transfers are incompletely forwarded; delays occur due to incomplete requests or records having been forwarded to a different location.
- Duplication of assessments occurs as a result of interstate differences in admission criteria or because test results are unavailable.
- Gaps in services occur because of differences in special education programs, materials or methods,

because no program is available when the migrant arrives or because the child is not eligible for special education in all states.

- In some areas migrants may be inappropriately placed in special education due to language barriers.
- Mildly handicapped migrants may be served in remedial classes rather than in special education classes because of the time involved in processing special education referrals.
- Lack of awareness and consistent and purposeful coordination between migrant education and special education impedes the efficient identification of and service delivery to handicapped migrant students.

Although the sources cited here are, in the main, 4 or more years old, there is little evidence that significant progress has been made in accumulating a data base sufficient to clearly identify the special education needs of migrant students. The members of the California Policy Workshop (CSDE, 1986) made several recommendations to improve identification and placement of migrant students requiring special education. A synopsis of the participants' findings follows:

- Reemphasize identification through Child Find.
- Develop a state system to identify migrant handicapped students with emphasis upon awareness

through media campaigns.

- Identify, review, and analyze diagnostic instruments followed by field testing, dissemination, and in-service training of appropriate staff.
- Conduct workshops to enhance awareness of culture and language as they may impede proper identification and diagnosis of migrant students.
- Implement a system within the Migrant Student Record Transfer System (MSRTS) whereby local education agencies (LEAs) will be made aware of any special education referrals and partial assessments made for migrant students (including the assessment date).

GUIDELINES FOR THE FUTURE

There is a pervasive need felt by migrant educators to achieve greater coordination of their efforts with those of their co-professionals in special education. Broad-ranging responses to existing needs emerged from the 1984 National Policy Workshop on Special Education Needs of Migrant Handicapped Students. The Interstate Migrant Education Council (IMEC) surveyed individuals who attended the National Policy Workshop to document actions taken by the participating states (IMEC, 1985). A summary of the principal activities undertaken by the states was developed and appears below (IMEC, 1985,

Table 1):

1. Increased communication between migrant and special education personnel.
2. Results of Workshop shared at migrant conferences, meetings, etc.
3. Results of Workshop shared at special education conferences, meetings, etc.
4. Position added/assigned to coordinate services.
5. Increased communication regarding these students' needs to personnel at the LEA level, e.g., administrators, teachers, aides, etc.
6. Needs assessment/data base study initiated.
7. Formation of state task force or coordinating committee.
8. Development of public awareness plan.
9. State sponsorship of a state level policy workshop.
10. Implementation of a new bilingual education law.
11. Implementation of interdepartmental agreements for purposes of coordinating services to these students.
12. Inclusion of migrant/special education personnel in training (in-service, etc.) workshops.
13. Inclusion of Workshop results in key state publications, e.g., newsletters, technical reports, etc.

14. Visits by key state personnel (e.g., administrators, board members, etc.) to migrant programs.
15. Plans developed for cooperative endeavors with universities or resource centers.
16. Migrant and special education personnel work in the same department/division and therefore communicate regularly.
17. Enhanced coordination with other states for information transmittal.
18. Enhanced interdistrict coordination for information transmittal.
19. Development of a manual of procedures to guide personnel in serving these students.
20. Development of a coordinated service plan model to serve these students.
21. Linkage with legal services projects to insure proper delivery of service.
22. Presentation of Workshop issues to the state board or Chief State School Officer.
23. Submission of 143 grants for purposes of addressing Workshop related issues.
24. Sponsorship of summer institutes funded by state departments of education for purposes of informing special and migrant education personnel regarding this population of

students.

25. Policy action taken by the Chief, State Board, or Governor to enhance services to migrant handicapped students.
26. Preliminary plans developed for the establishment of intermediate diagnostic/curriculum centers.

The list of activities is extensive and represents the efforts put forth by educators to meet the needs of migrant students requiring special education. The 1984 National Policy Workshop on Special Education Needs of Migrant Handicapped Students spawned renewed interest and advocacy whose effects are still being felt in the migrant education community. For example, California followed up the National Workshop with one of its own to address more state-specific issues. Areas of concern included funding, interagency cooperation, information sharing/coordination, assessment and diagnosis, and cross-training. The results of this state level workshop paralleled those of the national workshop, as it enhanced awareness of the problems faced by migrant students needing special education and directed efforts toward the solution of those problems.

Other states have taken different approaches. A full-time, statewide specialist was hired in Washington to assist the state and schools by examining policies to ensure that migrant children are adequately served. The

specialist has additional responsibility for monitoring inappropriately placed migrant students. The state plans to hire a multicultural specialist to work with all children, including migrants.

Identification of specific, exemplary programs that have shown an ability to provide for the special education needs of migrant students is difficult. The nature of special education service mechanisms within schools causes them to serve the needs of all students within the system requiring special education. The typical population size is small and the number of resources required to serve the population adequately are many. Special education services are rarely devoted to students belonging to a certain demographic group, but are rather aimed at classes of problems which students have.

Although no effort is attempted here to identify all the endeavors now being made to allow migrant students proper access to special education services, one is worth noting as an example of the creative efforts underway throughout the nation.

The Migrant Education Center at the State University of New York at New Paltz has developed two videotapes for training parents and outreach workers. Development efforts were federally funded by the Office of Special Education and Rehabilitation Services under the Handicapped Children's Early Education Program. The two

videotapes are titled "It's Time to Ask" and "Play is Wonderful." The first tape "takes a look at babies and how they develop, with questions to ask specific to growth" (S. Saland, L. Sarda, & M. Taylor, personal communication, March 9, 1987).

The second videotape "encourages parents to become actively involved with their baby's development through a variety of early intervention strategies" (Saland, Sarda, & Taylor, personal communication, March 9, 1987). Plans exist to develop parent training booklets and training manuals to accompany the videotapes. This work, along with ongoing projects in other states, can go far in bringing needed services to migrant students.

Recent legislation has been passed by Congress to enhance interstate and intrastate transfer of information regarding migrant students who need special education. The Senate passed Senate Bill S373 and the House of Representatives passed H.R.5, both pertaining to Chapter I reauthorization, with the following language included:

> The Secretary is also authorized to enter into contracts with State educational agencies to operate a system for the transfer among State and local educational agencies of migrant student records (including individualized education programs).

The import of this legislation to special education is identification of "individualized education programs"

as part of the Migrant Student Record Transfer System (MSRTS). As discussed earlier, MSRTS has been modified to incorporate needed information to support the exchange of information regarding special education needs of migrant students.

CONCLUSION

Migrant students--especially those requiring special education--are at a disadvantage in our nation's tradition-based schools. Highly mobile migrant students change schools frequently enough to be out of step with normal school calendars, causing both handicapped and gifted students to be underidentified as candidates for special programs. Migrant students who are more "settled out" and remain for some time in the same school carry with them academic losses sustained during times of high mobility. These students find themselves being overrepresented in some categories of special education. Even when migrant students are placed properly, the time consuming task of developing an individualized education plan often is interrupted by a move to a new school.

Information exchange and mechanisms for ensuring academic continuity for the special education student are just now beginning to emerge. More interstate and intrastate coordination is prerequisite to equitable educational treatment of migrant students.

· Additional efforts to recruit eligible students are called for, along with improved involvement of the parents of migrant students. Parents who work in the fields by day, who are always at the brink of economic failure, who often speak a native tongue not understood by school staff, and who have educational deficits virtually unmatched by other groups in our society cannot be effective advocates for their own children. Handicapped students may not find themselves with an opportunity to enter the school at all and, when enrolled, suffer disadvantages not common to other groups of students. If the parents of migrant children are ill-equipped to influence the educational process, others must act upon the mandate to build an educational system that enfranchises all our citizenry.

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